## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This frappropriate. All further coindicated unless corrected maintenance fee notification	orrespondence including below or directed oth	o the Pate	ent. advance or	ders and notification	of m	aintenance fees wi	ill be r	nailed to the current	correspoi	ndence address as	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  27885 7590 01/05/2012						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Via EFS web  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is NEW ACCOMPANICAL SAMPANICAL MANAGEMENT AND ACCOMPANICAL MANAG					
FAY SHARPE LLP 1228 Euclid Avenue, 5th Floor The Halle Building Cleveland, OH 44115											
, , , , , , , , , , , , , , , , , , , ,						Kristi A	A . I	Murphy	`	(Depositor's name)	
						Syma	1 (1	-/www	<u>~~</u>	(Signature)	
						March	5,	2012 /	U	(Date)	
APPLICATION NO.	N NO. FILING DATE			FIRST NAMED INVEN	TOR		ATTOF	NEY DOCKET NO.	CONFI	RMATION NO.	
10/687,142	10/16/2003			Michael R. Furst		A2486USNP/XERZ201277US01 8247					
TITLE OF INVENTION:										***************************************	
APPLN, TYPE	SMALL ENTITY	ISSUE	FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	<u> </u>	DATE DUE	
nonprovisional	nonprovisional NO		\$1740	\$300		\$0		\$2040 0		04/05/2012	
EXAMINER		ART UNIT		CLASS-SUBCLASS							
RODRIGUEZ, LENNIN R		2625		358-001150							
<ol> <li>Change of correspondence address or indication of "Fee Address" (3° CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondenc Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.</li> <li>ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED OF PLEASE NOTE: Unless an assignee is identified below, no assign recordation as set forth in 37 CFR 3.11. Completion of this form is a set form.</li> </ol>				data will appear on the patent. If an assignee is identified below, the document has been filed for							
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)											
XEROX CORI		NORWALK, CT									
Please check the appropria	te assignee category or	categories						****			
4a. The following fee(s) are submitted:  Mssue Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies				Hb. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed. Payment by credit card. Form PTO-2038 is attached.  Xhe Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 24 0 3 (CACCOUNTING)							
5. Change in Entity Statu a. Applicant claims	SMALL ENTITY statu	ıs. See 37 (						ITY status. See 37 CF			
NOTE: The Issue Fee and interest as shown by the re					an th	e applicant; a regis	tered a	ttorney or agent; or the	e assignee	e or other party in	
Authorized Signature  Typed or printed name	wy			Date <u>M</u> d		h 5, 2012 43,672					
This collection of informat an application. Confidentis submitting the completed this form and/or suggestion Box 1450, Alexandria, Vir Alexandria, Virginia 2231	ality is governed by 35 application form to the ns for reducing this but ginia 22313-1450. DO	U.S.C. 12 USPTO	2 and 37 CFR Time will varv	1.14. This collection is depending upon the i	s estii ndivid	tain a benefit by th mated to take 12 m dual case. Any con	e publi inutes nments	to complete, including on the amount of tin	gatherin e von re	ng, preparing, and quire to complete	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.